HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION 307 W. CORNELIUS HARNETT BLVD. LILLINGTON, NC 27546 910-893-7547 PHONE 910-893-9371 FAX Application for Repair Steve & Devise Stafford EMAIL ADDRESS Staffordsde amail.com NAME Wild Forest Mobile Home Park, LC PHONE NUMBER 919-935-4753 PHYSICAL ADDRESS 88 Wild Forest Lane -> Upill See tank MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL) 1195 ROSSEN ROAD BEAUCIACK, NC27207 IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME WildForest Mobile Home Park, LLC Type of Dwelling: [] Modular Mobile Home [] Stick built [] Other Number of bedrooms [] Basement Garage: Yes[]No ⋈ Dishwasher: Yes [] No 🔀 Garbage Disposal: Yes [] No [] Water Supply: [] Private Well [] Community System (County Directions from Lillington to your site: Highway 87 South to Olivia Road Turn Left on Olivia Road to Bernaver School Pd. Two Right (south) on Benhaven School Rd. to Wild Forest larg - 1st Pump Tank in Front of 88 wild Fagt In order for Environmental Health to help you with your repair, you will need to comply by completing the following: 1. A "surveyed and recorded map" and "deed to your property" must be attached to this application. Please inform us of any wells on the property by showing on your survey map. 2. The outlet end of the tank and the distribution box will need to be uncovered and property lines flagged. After the tank is uncovered, property lines flagged, underground utilities marked, and the orange sign has been placed, you will need to call us at 910-893-7547 to confirm that your site is ready for evaluation. Your system must be repaired within 30 days of issuance of the Improvement Permit or the time set within receipt of a violation letter. (Whichever is applicable.) By signing below, I certify that all of the above information is correct to the best of my knowledge. False information will result in the denial of the permit. The permit is subject to revocation if the site plan, intended use, or ownership changes. 1/11/16 Signature

HOMEOWNER INTERVIEW FORM

It is important that you answer the following questions for our inspectors. Please do not leave any blanks if possible, and answer all questions to the best of your ability. Thank You.

Have you received a violation letter for a failing system from our office? [] YES NO
Also, within the last 5 years have you completed an application for repair for this site? [] YES NO
Year home was built (or year of septic tank installation)
Septic Tank Pumper
Designer of System
1. Number of people who live in house?# adults# children# to
2. What is your average estimated daily water usage?gallons/month or daycount
water. If HCPU please give the name the bill is listed in
3. If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly
4. When was the septic tank last pumped? How often do you have it pumped?
5. If you have a dishwasher, how often do you use it? [] daily [] every other day [] week
6. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] monthly
7. Do you have a water softener or treatment system? [] YES [] NO Where does it drain?
8. Do you use an "in tank" toilet bowl sanitizer? [] YES [] NO
9. Are you or any member in your household using long term prescription drugs, antibiotics or
chemotherapy?] [] YES [] NO If yes please list
10. Do you put household cleaning chemicals down the drain? [] YES [X] NO If so, what kind?
11. Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES 14 NO
12. Have you installed any water fixtures since your system has been installed? I LYES 64 NO. If you
please list any additions including any spas, whirlpool, sinks, lavatories, bath/showers, toilets
13. Do you have an underground lawn watering system? [] YES NO
14. Has any work been done to your structure since the initial move into your home such as a roof gutt.
drains, basement foundation drains, landscaping, etc? If yes, please list
15. Are there any underground utilities on your lot? Please check all that apply:
Power [] Phone [] Cable [] Gas M Water
16. Describe what is happening when you are having problems with your septic system, and when was the
first noticed?
Primping Tank Collapsed - Services 3 or 4 Trailers - 2 Trailers are currently Empty - Please call to meet 17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy
17. Do you notice the problem as being natterned or linked to a specific area to the
rains, and household guests?) [] YES MO If Yes, please list

Nº14222

OPERATIONS PERMIT

	(2)	/	
Name: (owner)	000 1000	19/00	New Installation Septic Tank
Property Location: SI	R#_ 12030	1 1 1	Repairs Nitrification Line
Su	ubdivision Wild	toot MITP	Lot # 4, 7, 8 and 9
TA	AX ID#		Quadrant #
Contractor:			Registration #
Basement with Plumbin	ng:	Garage:	
Water Supply:	ell Public	Community	
Distance From Well:	_50ft.		
Following are the speci	ifications for the sew	age disposal syst	em on above captioned property.
Type of sustains D.C.		T	
		Ø-Other Vc∟	
	ptic Tank: 7X/000 Eg		
Subsurface No Drainage Field dit	o. of 2 exact l	length 340 f	width of 3 depth of 8 in.
French Drain:		ii dittiiIt.	ditches in.
. –	a 11	Date:	29 Sept 2000 00
PERMIT NO.	8/1 Fen		y: On Coff Wry Environmental Health Specialist
Rep Xay	Lesar, Lines		
	MHP ROI	AP	

Con7/#17811

IMPROVEMENT PERMITCON

Be it ordained by the Harnett County Board of Health as follows: tion of any building at which a septic tank system is to be used for dispo from the Harnett County Health Department."	sal of sewage without first obtaining a written permit
Name: (owner) Grover Dougla)	New Installation Septic Tank
Name: (owner) Grover Douglas) Property Location: SR# [203]	
Subdivision Wild Forest MHP	1014 67 4 5
Tax ID #	Quadrant #
Number of Bedrooms Proposed: 4x2 Bed Rans In	t Size:
Basement with Plumbing: Garage: Garage:	Cont of Permit # 17811
Number of Bedrooms Proposed: 4×2 Bed Ram Lo Basement with Plumbing: Garage: Water Supply: Well Public Community Distance From Well: ft.	
Following is the minimum specifications for sewage disposal system final approval. Type of system: Conventional Size of tank: Septic Tank: 4x 1000 gallons Pun	em on above captioned property. Subject to
Size of tank: Septic Tank: $\frac{4x\cos \theta}{2}$ gallons Pun	np Tank: 3000 gallons
Subsurface No. of . exact length Drainage Field ditches of each ditch ft. French Drain Required: Linear feet	width of
	Environmental Health Specialist
(70 512 1203 Rd	
each home xsour	

HARNLII (JNTY HEALTH DEPARTMENT

Nº 17811

IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board tion of any building at which a septic tank system from the Harnett County Health Department."	to be used for disposal of sewage without	first obtaining a written permit
Name: (owner) Grace Douglas	New Installa	tion Contin Toul
Name: (owner) Grace Douglas Property Location: SR# 253	Repairs	Nitrification Line
Subdivision Wild Forest MHP Tax ID #		
Tax ID #		Lot # 6, 7 8, 9
Number of Bedrooms Proposed: 2 BR	Quadrant #	/
		^
Water Supply: Well Well Public	Garage: Meet on si	te tor tinal Lagort
Distance From Well: 50	Bottom Can Be Inspected	Refore placing
Water Supply: Well Public Distance From Well: 50 ft. Following is the minimum specifications for s final approval.	EEE-222 LAY IN OITCL	Octor c p many
final approval.	ewage disposal system on above caption	ned property. Subject to
Type of system: Conventional	Other _ EE 6-22 2 Lng	Total mount OF Line Flagger
Size of tank: Septic Tank. 4 X (33)	rollons D m . 200 h	TE 0001
Subsurface No. of exact Of each	length Eff-222 Law width of	depth of
French Drain Required:	length $\frac{286-222}{6}$ ft. ditches $\frac{3}{3}$ ft.	ditches 18 in.
French Drain Required: Li	near feet	
This permit is subject to revocation if site	Date: 4-14.2000 /	4 Apr. 12000
plans or intended use change.	Signed: Fryironmental II	weeth S
	Environmental H	
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HAI T COUNTY HEALTH DEPARTMENVIRONMENTAL HEALTH SECTION

№ 12890

OPERATIONS PERMIT

)	/		
Name: (owner)	rover to	49/as	New Installation	Septic Tank
Property Location:				
	Subdivision Wild !	oest MHP	Repairs Lot # 1, 2, 3, 4, 5	
			Quadrant #	
Contractor:			Registration #	
Basement with Plum	bing:	Garage:		
Water Supply:	Well Public	Community		
Distance From Well:	50 _{ft.}			
Following are the sp	ecifications for the se	wage disposal sys	tem on above captioned p	roperty.
Type of system:	Conventional	☐ Other		
			mp Tank: 3500 gallons	
Subsurface	No. of exact	t length	width of depth	of C
		ch ditch 350 ft	width of depth ditches ft. ditches	sin.
French Drain:	Linear feet	a d	09 Soft 1.	2 1 2
17	Z119	Date:	1 squente	2000)
PERMIT NO. //	DO 1 For	Inspected	by: UM OAJ Environmental Healt	h Specialist
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	1000 gal contract	H	MI	7
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HARN OUNTY HEALTH DEPARTMENT

IMP	ROVEME	ALT DEDLA	Nº 17810
Be it ordained by the Harnett County I tion of any building at which a septic tank s from the Harnett County Health Departme	Board of Health as fo	IN I PERMI	T No 17810 T Cont of frant #17809
tion of any building at which a septic tank septi tank septic tank septic tank septic tank septic tank septic tank	nt."	r disposal of sewage w	ithout first obtaining a written permit
Name: (owner) Conver Doug	las	V New Inc	stallasia a T
Name: (owner) SR# 1203	Benhaven Sch	Repairs	Septic Tank Nitrification 1
Subdivision LINE Free + 1			A Marication Line
Subdivision W. J. J. Fure. + Lan Tax ID #	(Lot#
Tax ID # Number of Bedrooms Proposed:		Quadrant	#
Number of Bedrooms Proposed: Basement with Plumbing:		_ Lot Size:	
and the same of th	C .	O Con't of	Permit # 17x00
Water Supply: Well Public Distance From Well:	Communi	ty	. 1/851
Following is the minimum	ft.		
Following is the minimum specifications for final approval. Type of system: Conventional	or sewage disposal	system on above car	ationed name
Conventional	VALOU		
Size of tank: Septic Tank: 1000 Subsurface No. of ex	Y Gallan		
Subsurface No. of	act least	Pump Tank:	gallons
Diamage Field ditches	act length	width of	depth of
French Drain Required:	Linear feet	/ ditches	depth of in.
	,	exectle Da	d 100 1
This permit is subject to revocation if sit plans or intended use change.	te Signed:	7	J Han 2000
disc change.	orgined.	Environments	Health Specialist
- 70 SR 120	13		
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spely Line 3000 Spely Line Pump Tank	The same of the sa	Puc pipe	35
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			(4)

HARI __ I JUNTY HEALTH DEPARTMENT

№ 17809

IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "I from the Harnett County Health Department".	
Department."	No Person shall begin construc- first obtaining a written permit
New Installed	
Property Location: SR# 1253 Repairs	
	☐ Nitrification Line
Subdivision W. Id Forest MHP Tax ID #	Lot # /2 3 4 5
Number of Redrooms P	7 1 , ,
Number of Bedrooms Proposed: 2 Bedrooms each Lot Size: 9.47 Ac Basement with Plumbing: Garage: December 19.000 Constant # Constant	
Distance From Well: So Community Mu) 7 Leave C	ditches open so
Water Supply: Well Public Community Mu) 7 Leave Community Mu) 7 Le	spected Betwee Placing
Type of system: Conventional Conventional	ed property. Subject to O.tch
Conventional Conventional	
Size of tank: Septic Tank: 500(5) gallons Pump Tank: 500(5) gallons Pump Tank: 650 exact length of each ditch 340 ft. ditches 3 ft. 500 Linear feet	gallons Is 1000'
Drainage Field ditches 2 exact length 340 ft ditches 3	depth of
French Drain Required: Linear feet	ditches 10 in.
This permit is subject to revocation if site Date: 10142005	7
Signed: 10 Intended use change.	14/Ani/2000
Environmental (He	alth Specialist
7017-2353 Red	
C 11 Pressure Supply	NOTE This permit
1885 B 45.4 Blue to	of 2 Bedrooms
oo El 819 mutilo	each
d lel	Meet onsite
(4)	Must Leave
So each 10.	Ditches open
Blue 100'	•
122 Blyc 80'	So The Oitch Bottoms
	CAn be
Blue 80	Inspected -
	Then Then
Yellov 60	FOSTALLAY
10' Buffer /35	